Apr-25-97 3:[illegible]P [illegible] P.5

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLE

FILED
May 06 1997 8:00am
Secretary of State

APPLICATION
ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

Make Check Payable To: Secretary of State

1. Name and Mailing Address of Corporation: DOCUMENT # P96000003428

FINANCIAL PARTNERS of AMERICA, INCORPORATED
700 W. Hillsboro Blvd.
Bldg. 4 Suite 207
DEERFIELD BEACH, FL. 33441

2. If Address address below:
Address
City and State Zip Code

3. If Principle Office Address is different from mailing address, enter address below.
Address
City and State Zip Code

4. Date Incorporated or Qualified To Do Business in Florida: 1-10-96

5. FEI Number: 65-0632157

FEI Number Applied For
FEI Number Not Applicable

6. [illegible]
CERTIFICATE OF STATUS DESIRED

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P/S T/D	FRANK D. TUCCI	700 W. Hillsboro Blvd. Bldg. 4 St. 207	DEERFIELD BEACH, FL. 33441
V/D	Julius MONTAGNA	700 W. Hillsboro Blvd. Bldg. 4 St. 207	DEERFIELD BEACH, FL. 33441
D	TOM CHEN	700 W. Hillsboro Blvd. Bldg. 4 St. 207	DEERFIELD BEACH, FL. 33441

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REGISTERED AGENT INFORMATION

8. Name and Address of Current Registered Agent

FRANK D. TUCCI
700 W. Hillsboro Blvd.
Bldg. 4 Suite 207
DEERFIELD BEACH FL. 33441

9. If changed, new registered agent / office
Name
Street Address (Do NOT Use P.O. Box Number)
Street Address (Do NOT Use P.O. Box Number)
City State FL. Zip

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Frank D. Tucci
REGISTERED AGENT MUST SIGN
Date: 4-28-97

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐ (See other side for additional information.)

12. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐ (See other side for information on intangible tax.)

13. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Officer or Director: Frank D. Tucci
Date: 4-28-97
Daytime Phone #: (954) 425-0900

Typed or printed name of signing officer or director: FRANK D. Tucci

4/25/97